Healthy Arizona 2010 Mini-Grants

The Arizona Department of Health Services (ADHS), Office of Health Systems Development, Healthy Arizona 2010 / Healthy Communities is pleased to announce the availability of funds to address the prevention of cardiovascular disease through the creation of **community walking programs**. These programs must run for no less than four weeks. Specific tasks that program design must address at a minimum include the following:

- a. Develop a theme, project name and logo as core components of the marketing campaign.
- b. Develop and disseminate a print product and/or website that will outline the project's major goals and provide contact information. (Note: all recipients will be expected to have an existing website; an additional page or link will satisfy this task.)
- c. Publicize and conduct a project launch event to draw communitywide attention to the initiative.
- d. Evaluate / track the campaign participants.
- e. Develop a plan to sustain the campaign (community sponsorship) long term.

Applications that are responsive to this RFP will be reviewed following the April 30, 2004 deadline. In the consideration of applications, geographic balance throughout the state will be given priority.

In developing this application, communities are invited to consult the following websites for resource information:

http://www.cdc.gov/nccdphp/dnpa/physical/index.htm www.americaonthemove.org

The funds will be awarded as mini-grants to applicants that meet the intention of the grant guidance. There is no fixed amount of each award. The amounts will be based on proposed activity. The awards will be for up to five thousand dollars (\$5,000). The deadline for submission of grant applications is April 30, 2004. Successful applicants will be notified by May 15, 2004 with funds to be disbursed in June 2004. Projects funds must be expended with major activities completed before September 30, 2004.

I Purpose

Moderate daily physical activity has long been recognized as an essential ingredient of a healthy lifestyle. Yet many children and adults in Arizona lead a sedentary lifestyle. This inactivity is contributing to the obesity epidemic that was declared by ADHS in 1999 and more recently, by the U.S. Surgeon General. Obesity is not just a matter of personal health, it's a costly and deadly public health concern that affects economic productivity, state budgets, and personal and family well being. Walking is the ideal way for individuals of all ages to start changing to healthier lifestyles. Much of the national health promotion data supports walking, and individuals who are not already active are more likely to start with a group activity such as a team or club. Community projects that have

wide support of both civic and business leadership can be an effective tool in motivating behavioral change.

Measurable outcomes of these projects must be in alignment with the Physical Activity and Nutrition objectives in the Healthy Arizona 2010 plan (see www.healthyaz2010.org) The elimination of health disparities is an overarching goal of Healthy People 2010/ Healthy Arizona 2010, and applicants are encouraged to address disparities in their project design.

II. Funding Exclusions:

Because of the nature of these awards, they may not be used for:

- Physical construction or renovation of a facility or space within a building.
- Indirect costs.
- Traditional health promotion activities alone (e.g., distribution health education materials).
- Direct clinical services or the purchase of direct services.
- Purchase of food and beverages.

III. Eligible Applicants:

- Counties
- > Tribes
- Cities and towns

Each funded organization must meet the following criteria:

- Does not currently receive funding or support from the Arizona Department of Health Services for the same services, program or project for which the minigrant is being sought.
- Is organized as an entity that can receive these funds, or is working in partnership with an organization that can serve as a fiscal intermediary.

IV. Obtain Applications From: Tanja James 602-542-1219

V. Obtain Technical Assistance:

Technical assistance related to the substance of the application is available by calling Geri Tebo at 602-319-5817 or by e-mail, gtebo@hs.state.az.us

VI. <u>Deadline</u>:

April 30, 2004

VII. Procedures for obtaining funds:

A comprehensive, detailed proposal is not necessary. Complete the enclosed application by answering <u>all</u> the questions and providing any requested attachments.

VIII. Determination of Awards:

A Review Panel including two ADHS employees, a representative from the Healthy Arizona 2010 Board, a representative of a community-based agency serving the target population, and an employee of the Division of Public Health Services will review accepted applications.

The Office of Healthy Arizona 2010 will notify all approved applicants, and the application will be processed through the Department of Health Services procurement procedures. The procurement process takes at least four weeks.

IX. Review Criteria:

Applications that meet the intent and requirements of the guidance will be reviewed for funding consideration. Statewide coverage, including adequate representation of rural areas, will be a strong consideration in the selection of grantees. Selection of projects that address health disparities will be given priority in the review.

Applications must meet each of the following criteria:

- The effort to be funded is consistent with the goals and objectives of the ADHS Healthy Arizona 2010 plan.
- The organization seeking funding is one of the eligible agencies or organizations listed above.
- All required application materials are included.
- The effort to be funded can be replicated or serve as a model for similar work in another community or area of the state.
- The objectives to be undertaken are clearly stated, measurable, appropriate and feasible.
- The role of the community and involvement of specific community groups is well defined and appropriate.
- The staffing to conduct the project is well defined and adequate.
- An evaluation method is incorporated into the project design.
- The budget is clear, complete and appropriate to the project, and complies with the requirements noted in the budget section.
- There is documentation of in-kind support and/or other income.
- The organization seeking funding agrees to meet the publication, reporting, and financial requirements of this award:
 - 1. All materials published through this award must include the following language:
 - "This publication was supported by the Preventive Health and Health Services Block Grant from the Centers for Disease Control and Prevention (CDC). Its contents do not necessarily represent the official views of the CDC. Funding was made possible through the Arizona Department of Health, Healthy Arizona 2010 project,"
 - 2. By September 30,2004, submit a final report describing the funded project including planning, implementation and outcome(s) through the funded period. This report should include evaluative statements and recommendations for others who might wish to undertake a similar effort.

- A copy of each document created in conjunction with this award must be included.
- 3. By September 30, 2004 submit a financial statement/summary indicating expenditures incurred in conjunction with this award.

There are no "weights" or other measures to be applied to these criteria, other than "yes" and "no." Each of the criteria must be met in order for the proposal to be funded.

X. <u>Distribution of Funds</u>:

Grant recipients will be eligible for a fifty percent (50%) payment at the beginning of the project when a submittal of the signed Grant Award Acknowledgement and a detailed plan of action are received. The remaining fifty percent (50%) will be paid upon completion of the project.

Mini-Grant Awards are available for up to \$5,000. Funds are limited. Grant awards will be disbursed upon grant approval until funds have been expended.

Arizona Department of Health Services HSD – Healthy Arizona 2010 1740 W. Adams, Suite 410 Phoenix, Arizona 85017

A	DHS Use (Only:
A:	N	F

Healthy Arizona 2010 Mini-Grants

-	ion Name:	,	Agency, Non-Pront Organization):	
Check one:	County Native American Tribe	City / Town		
Address:				
City:		County:	Zip:	
Contact Po	erson:		Telephone:	
Contact Po	erson's Title:			
Fax:		E-mail:		
II. Pr	oject Information:			
Name of F	Project:			
A.	Project Description (Describe the project you ar project.)	re proposing and	d why you would like to undertake this	

В.	Goals and Objectives (List your goal(s) and corresponding objectives here. They should be clearly stated and related to the Project Description. Additionally, state the relationship to Healthy Arizona 2010 objective(s). Be sure your objectives are measurable.)
C.	Projected Timeframe and Activities- Briefly outline the project timeline and the activities to be completed during the project:
D.	Area/ Population 1. Describe proposed geographic area to be covered:
	1. Desertoe proposed geographic area to be covered.

2. Propos	sed population to be covered (<i>check one</i>):
Entir	e population within defined geographic area
Limi	ted portion of population within defined geographic area
	escribe characteristics of the population (e.g., age, socioeconomic ce/ethnicity, etc.):

E. Partnership or Coalition Relationship

Describe the relationship in which you are/will be working to implement the service, program or project to be funded. Include information on how the project will be conducted, managed or directed (e.g., by a grass-roots community advisory group; by a distinctly identifiable community component of your organization). Include names of partner groups.

F. Staffing - Describe how your project will be staffed:

III. Budget Information:

Provide a simple budget. Information is needed only for the project for which you are requesting funding, not for the organization as a whole. **Note these requirements**:

- There must be an identifiable in-kind contribution.
- Funds may be used for personnel costs.
- Administrative overhead is <u>not</u> an allowable expense.
- Funds may <u>not</u> be used to pay for direct clinical services, or for physical construction or renovation of a facility or space within a building.

Use the following format if possible, leaving inapplicable categories blank and adding your own. If this format is not suitable, attach a <u>one-page</u> budget of your own, using the same column headings.

Line	Budget Categories	Mini-Grant	In-Kind/Other (specify source)	Totals
1	Personnel		(specify source)	
2	Supplies: A. Office B. Other			
3	In-state travel (@ \$0.345/mile)			
4	Postage			
5	Printing/Photocopying			
6	Rent			
7				
8				
9				
	Totals	\$	\$	\$

IV. **Budget Summary:**

(Provide a brief description of proposed costs to be funded by the mini-grant. Write a description for each corresponding line number.):

1.	Personnel:
	i cibolilici.

Position Title	Hours/week	# of weeks	Salary (rate/wk)	Total

2.	Supplies A. Office:			
	A. Other:			
3.	In-State Trave	·1		
4.	Postage			
5.	Printing/Photo	ocopying		
6.	Rent			
7.				
8.				

V. Attachments

- Complete the following one page Certification and return with the application form.
- If you are a non-profit (vs. public institution), please include documentation verifying your non-profit status.
- Attach one (1) letter of support from one of your identified coalition members or partners demonstrating a commitment to participate in your proposed project.

Certification

The	
(name of organization) is submitting this application for funding fro Healthy Arizona 2010 mini-grant program	om the Arizona Department of Health Services,
As the	's
requirements of the Healthy Arizona 2010 m	ccurate, and if funded, we agree to comply with the
including planning, implemer This report should include ev	it a final report describing the funded project ntation and outcome(s) through the funded period. aluative statements and recommendations for others a similar effort. A copy of each document created d must be included.
2. By September 30,2004 submit expenditures incurred in conjugation.	it a financial statement/summary indicating unction with this award.
beginning of the project period and the rema	50%) of the award will be distributed near the kinder, fifty percent (50%), will be distributed at the f the Award Acknowledgement document and final
	Signature
	Name printed or typed, Title
	Date

Arizona Department of Health Services Community and Family Health Services Office of Healthy Arizona 2010

Healthy Arizona 2010 Mini-Grant Award Acknowledgement

(Name of Organization)			
Acknowledges the receipt of a total grant award of \$	paid to the above agency for:		
At this time,	(name of organization) is requesting		
Signed:	Date:		
Typed Name:			
Title:			

Healthy Arizona 2010 Mini-Grant Proposal Review Form

Name of	Proposal: _	Number:
Date Received:		Amount Requested:\$
Name of	Reviewer:	Date:
Yes	No	Proposal Element
		1. The organization meets eligibility criteria
		(Circle one: County, NA Tribe, City or Town)
		2. All required application materials are included:
		a. All sections completed (I – IV)
		Attachments:
		b. Certification
		c. Letter(s) of Support from collaborating entity(ies)
		valuate each remaining category. Your options are Yes and No-the
		ets (yes) or doesn't meet (no) the category. Check the column
appropri	iate for eac	
		3. The proposal is consistent with the goals of the Healthy Arizona 2010
		plan and directed to community motivation.
		4. The proposed project can be duplicated in another community/area.5. Objectives are clearly stated, measurable, appropriate and feasible.
		6. The role of community coalitions/advisory groups is well defined and
		appropriate.
		7. The staffing to conduct the project is adequate.
		8. The target population to be served is clearly defined and appropriate.
		9. The budget is clear, complete and appropriate for the project.
		10. The budget complies with the requirements noted in the budget section
		of the announcement including evidence of in-kind support.
Strengths	s:	
Weaknes	ses:	
Commen	ts:	